

AUG 24 2005

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| FROM | Michael G. Johnston |
| TELEPHONE | 919 286-8037 |
| FAX | 919 416-8337 |
| DATE | Wednesday, August 24, 2005 2:40:16 PM |

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|-----------------------------|--------|
| PAGES INCLUDING COVER SHEET | 37 |
| USER NUMBER | 013341 |
| CLIENT/MATTER | 000019 |

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Attention:

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PTO/8B/21 (09-04)

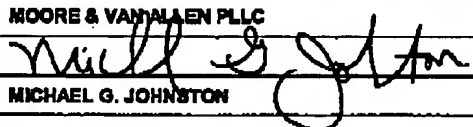
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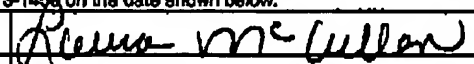
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| | | |
|---|------------------------|--------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10055280 |
| | Filing Date | September 30, 2002 |
| | First Named Inventor | Jeffrey C. Leung |
| | Art Unit | 3731 |
| | Examiner Name | JACKSON, GARY |
| | Attorney Docket Number | 013341-000018 |
| Total Number of Pages in This Submission | | |

| ENCLOSURES (check all that apply) | | |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notices, Briefs, Reply Briefs) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copy of 1 Cited Non-US Patent Reference. |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|---|----------|--------|
| Firm Name | MOORE & VANHALEN PLLC | | |
| Signature |  | | |
| Printed Name | MICHAEL G. JOHNSTON | | |
| Date | August 24, 2005 | Reg. No. | 38,194 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
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| Signature |  | | |
| Typed or printed name | Laura McCullen | Date | August 24, 2005 |

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| | | | |
|---|--|--|--|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4818). FEE TRANSMITTAL For FY 2005 | | Complete If Known Application Number 10/065,280 Filing Date September 30, 2002 First Named Inventor Jeffrey C. Leung Examiner Name Gary Jackson Art Unit 3731 Attorney Docket No. 013341-000019 | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 1,360.00 | | | |

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: **13-4385** Deposit Account Name: **Moore & Van Allen PLLC**
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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|---|----------|-----------------------|
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent | 50 | 25 |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

Total Claims 30 - 20 or HP = 10 - 7 = 3 x Fee (\$) \$60.00 = Fee Paid (\$) \$180.00

HP = highest number of total claims paid for, if greater than 20 *7 extra claims paid for at filing.

Indep. Claims 3 or HP = 3 x Fee (\$) \$60.00 = Fee Paid (\$) \$180.00

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|--------------|-----------------|
| <u>30</u> | <u>70</u> | <u>1</u> | <u>\$250</u> | <u>\$250.00</u> |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: 3 Month Extension of Time and IDS

\$1,200.00

| | | |
|---|---|--------------------------|
| SUBMITTED BY | | |
| Signature  | Registration No. (Attorney/Agent) 38,194 | Telephone (919) 288-8000 |
| Name (Print/Type) Michael G. Johnston | Date 08/24/2005 | |

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